DEPLOYMENT TESTING

Deployment Testing

- **Deployed Soldiers are at high risk for substance abuse. The following are some risk factors that can lead Soldiers to abuse drugs and/or alcohol.**
  - **Separation from families and friends- Home sick**
  - **Extended deployments past expected redeployment date**
  - **Lack of sleep and long hours – Fatigue**
  - **Concern for personal safety - Fear**
  - **Belief that they will never make it back home**
  - **Feeling of worthlessness – Unable to help family crisis at home**
  - **Financial Problems – Increased by deployment**
  - **Trauma – Seeing Soldiers and/or civilians die (PTSD)**
  - **Belief that no place, including jail or home with a BCD could be worse than where they are now**
  - **Belief that many Americans do not support the deployment effort**
  - **Lack of alcohol – Use drugs because alcohol is unavailable**

Deployment Testing

- **AR 600-85 paragraph 1-26.f., Army Substance Abuse Program dated 1 Oct 01 states *"Commanders will maintain ASAP elements while deployed, to the maximum extent possible."***
  - **Lesson learned: Many units that were sent to Iraq & Afghanistan believed that drug testing would not be conducted while deployed and were not prepared; DoD & CENTCOM mandated drug testing in theater and many commanders struggled to meet the requirements.**
- **Most deployments are to areas that have limited or no ASAP support; therefore commanders must have a plan for pre-deployment, deployment and redeployment.**

Pre - Deployment

- **Coordinate with the local Alcohol and Drug Control Officer (ADCO) to ensure:**
  - **Your unit has the supplies needed to conduct urinalysis collections until logistical support is established (based on local SOPs)**
  - **Your unit has the supplies needed to package and ship specimens to the supporting Forensic Toxicology Drug Testing Laboratory (FTDTL).**
  - **Your unit has certified Unit Prevention Leaders (UPLs) that have received refresher training on quality control checks, storage of specimens, packaging, and shipment of specimens to the supporting FTDTL.**
  - **That testing results are received by the appropriate personnel.**
  - **Your unit has a deployment testing SOP (can be obtained from the local ASAP or at www.acsap.army.mil.)**
  - **That NGB and USAR Soldiers ordered to active for more than 30 days are tested.**
  - **Conduct drug and alcohol awareness training and drug threat brief for your deployed area of operations.**

Pre-Deployment

- **Actions to take for a positive urinalysis when preparing to deploy:**
  - **If a Soldier's positive urinalysis for opiates, amphetamines and/or barbiturates is received prior to deployment, refer the Soldier to the Medical Review Officer (MRO) for determination of licit/illicit use (All other drug positives are considered illicit use without requiring MRO review).**
  - **Refer the Soldier to the Army Substance Abuse Program (ASAP) for a clinical evaluation. (A Soldier cleared by the MRO will not require a clinical evaluation.)**
  - **Process administrative separation action and initiate disciplinary procedures, as deemed appropriate.**
  - **Note: Only Soldiers requiring inpatient treatment are considered non-deployable. If a Soldier is retained on active duty, then the decision to leave the Soldier behind or to deploy the Soldier is at the commander's discretion.**

Deployment

- **Establish communication between the commander, UPL, rear detachment and installation ASAP as soon as possible.**
  - **NGB and USAR units will need to contact the installation ASAP that supports the first active duty unit in their chain of command.**
- **Conduct monthly random urinalysis testing as soon as feasible.**
  - **Ensure UPL maintains the unit ledgers and copies of the DD Forms 2624**
- **Conduct surprise health and welfare inspections for drugs and alcohol.**
- **Educate ALL Soldiers on the drug and alcohol policies while deployed.**
- **Positive Urinalysis results:**
  - **If the Soldier's positive urinalysis requires MRO review, contact the Division Surgeon for MRO guidance.**
  - **Initiate administrative/disciplinary procedures, as deemed appropriate, based on the information available.**
  - **Army Substance Abuse Program evaluation and counseling services are not currently available in theater. The Soldier will be seen during the redeployment cycle.**
  - **Do not ship the Soldier home unless a determination is made that the individual is an immediate threat to self or others.**

Re-Deployment

- As part of the redeployment cycle ensure:
  - Soldiers that had a positive urinalysis or alcohol related incident are referred to the clinical ASAP for a screening and evaluation.
  - That all Soldiers identified as drug abusers are processed for separation as required by AR 600-85; the separation authority will make the final determination to separate or retain.
  - Re-establish local communication with the ADCO and turn over the copies of the DD Form 2624 from testing conducted while deployed.
- Schedule the unit to take the Reintegration Unit Risk Inventory between 90-120 days after return as required by the DCS CONPLAN.
- Resume normal garrison drug testing and substance abuse education programs.
- Be prepared to provide extra training or educational interventions for potential increases in substance abuse and other high risk behaviors (spouse abuse, suicide attempts, crimes against persons, etc.) that occur after redeployment.

Summary

- **The main objectives of drug testing are deterrence, early identification of drug abusers and to enable commanders to assess the security, military fitness, good order and discipline of their units.**
- **Deployed Soldiers are at higher risk for drug abuse.**
- **Soldiers deployed to combat environments need to be mentally alert and ready to act without hesitation; Soldiers abusing drugs or alcohol cannot react and risk their lives and the lives of other Soldiers in their unit.**
- **Bottom Line: Commanders must maintain a substance abuse program while deployed to ensure the security, military fitness, good order, discipline and SAFETY of their units.**